

# EXTENSIONS OF REMARKS

IN RECOGNITION OF EMILIO R. JASO

HON. GREG LAUGHLIN

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 4, 1996*

Mr. LAUGHLIN. Mr. Speaker, one of the privileges that I have most enjoyed as a Member of the House of Representatives is the opportunity to offer assistance to the hundreds of veterans who reside in the 14th congressional district, and today I would like to recognize and pay tribute to someone who has devoted countless hours to this cause, Emilio R. Jaso, whose exemplary service as the Refugio County veterans service officer has earned him the respect and gratitude of area veterans.

Emilio Jaso was appointed to the veterans post in September 1988. A native of Refugio County, he retired from the U.S. Air Force with 20 years active duty and 10 years reserve duty of honorable service to our country. Mr. Jaso served one tour of duty in Vietnam and was awarded the Bronze Star Medal, Vietnam Service Medal with two Bronze Commendation Medals, and the Republic of Vietnam Campaign Medal. In addition, he was awarded the Army Good Conduct Medal, Air Force Good Conduct Medal, National Defense Medal with one Bronze Star, Presidential Unit Citation, and the Air Force Outstanding Unit Award.

Known for his dedication, professionalism, and long hours of service, Mr. Jaso was presented the Outstanding Veterans Service Officer of the Year for the San Antonio Region in 1992. Furthermore, the past 2 years he has been selected the regional director for San Antonio and is considered to be one of the most respected county veterans service officers in the State.

Veterans service officers routinely provide an array of assistance to veterans, including compensation and pension matters, hospitalization insurance, transportation, education, GI home and farm loans, disability retirement, and military records. Mr. Jaso continues to provide all of these services and many more to area veterans.

Mr. Jaso also finds the time for a number of other causes. He is a life member of Veterans of Foreign Wars Post 6290 and was selected as the Outstanding Post Service Officer for the Department of Texas. He is a charter member of the Knights of Columbus Council 1651, charter member of the Refugio County Veterans Monument Committee, member of Disabled American Veterans Chapter 210, member at-large of the American Veterans [AMVETS]. Mr. Jaso is frequently called upon by local schools to speak on patriotism.

In recognition of his outstanding service to his country, Mr. Jaso has received certificates of recognition and appreciation from the Department Commander of the American Veterans [AMVETS], the chairman of Veterans Land Board for the State of Texas and the Veterans of Foreign Wars.

Mr. Speaker, Refugio County is truly fortunate to have a veterans service officer with experience, compassion, and integrity that Mr. Jaso brings to his job. Emilio Jaso embodies the highest ideas of both government service and civic responsibility, and he deserves our profound gratitude and respect. I ask my colleagues to join me today in paying tribute to this outstanding American.

GAO REPORT SUPPORTS GOALS OF H.R. 2839

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 4, 1996*

Mr. STARK. Mr. Speaker, last December, I introduced H.R. 2839, a bill to require the Secretary of HHS to implement an on-line prescription drug information management program for Medicare beneficiaries. This system, known as the Medicare Medication Evaluation and Dispensing System [MMEDS], would provide the tools and information to beneficiaries and their health care providers that are needed to reduce instances of adverse drug interactions, over-medication, and other problems related to prescription drug use that harm our Nation's retirees and disabled.

On June 11, 1996, the General Accounting Office issued report B-261530 which discussed the benefits of a similar system in the Medicaid program. The report shows that the Medicaid program has been a clear success and—I would argue—supports the development of such a system for the entire Medicare elderly and disabled population.

Following are portions of the GAO summary—positive findings which I hope will help us pass H.R. 2839 as a way to save money and lives:

It is widely accepted in the health care community that inappropriate use of prescription drugs can cause adverse reactions that can lead to drug-induced illness, hospitalization, even death. Such inappropriate use can also be expensive for the Medicaid program. Concerned about this issue, the Congress mandated that states establish utilization review programs to review Medicaid prescriptions before drugs are dispensed (called prospective reviews) in order to prevent potential adverse medical reactions. The legislation did not require that prospective screening be automated. However, 43 States plus the District of Columbia have implemented or plan to implement automated prospective drug utilization review (PRODUR) systems. In most instances, PRODUR systems are implemented concurrently with an automated screening capability for Medicaid eligibility since both depend on automated systems that offer real-time responses to inquiries. The five States in our review have this feature.

Automated prospective drug utilization review (PRODUR) systems increased patient safety and reduced Medicaid program costs in the five states whose systems we examined; all five states found the systems bene-

ficial and worthwhile. During a 12-month period ending June 30, 1995, these five states' systems alerted pharmacists to over 6.3 million prescriptions that had the potential to cause adverse medical reactions from drug therapy problems including drug-drug interaction, overutilization, and pregnancy conflict.<sup>2</sup> Over 650,000 (10 percent) of these prescriptions were canceled because of the potential serious risk to patients. According to state officials, pharmacists reviewed and eventually filled the other prescriptions on the basis of the pharmacists' professional judgment and/or consultation with the recipients or their physicians.

Along with increasing patient safety, these systems also reduced program costs by over \$30 million, according to state and contractor reports. Over \$5 million of this total was attributable to rejecting efforts to refill prescriptions before a large portion of the earlier prescription would have been consumed, potentially causing harm to the patient; the remaining \$25 million resulted from prescriptions that were denied due to patient ineligibility. While these direct benefits are significant, the major dollar savings, in all likelihood—though more difficult to document—are achieved through avoided hospitalization due to inappropriate drug therapy. On the basis of its review of studies related to drug-induced illnesses, the Food and Drug Administration (FDA) indicated that 6.4 percent of hospital admissions nationwide can be traced to inappropriate drug therapy; some studies cite even higher rates for the elderly. Accordingly, avoided hospitalization could potentially save hundreds of millions of dollars annually. Savings could also accrue because PRODUR systems can help identify potential fraud, waste, and abuse.

The five states in our sample screened for different conditions and handled prescription cancellations differently. Consequently, reported numbers and types of patient safety alerts, prescription cancellations, and rates of savings varied. One state, for example, did not screen for pregnancy conflict. Three states automatically deny prescriptions with overutilization alerts, while the other two states place the responsibility with pharmacists to either deny or fill the prescriptions following such alerts. At present, states have no systematic way to share experiences and best practices. One approach toward accomplishing this would entail establishing a central clearinghouse at the state or federal level to collect and disseminate information. This would allow all states to make more informed decisions, offering citizens the best protection and states the most savings.

HOUSE CONCURRENT RESOLUTION 120 SUPPORTING INDEPENDENCE OF UKRAINE

HON. CHRISTOPHER H. SMITH

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, September 4, 1996*

Mr. SMITH of New Jersey. Mr. Speaker, I rise to urge passage of House Concurrent Resolution 120, a measure which I am pleased to have cosponsored, supporting the

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